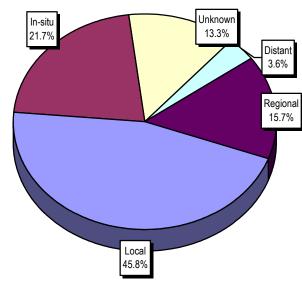
## **Bladder**

Incidence and Mortality Summary							
	Male	Femal	e Total				
Age-adjusted incidence rate per 100,000	19.1	6.7	11.9				
Total # of new cases # of new invasive cases # of new in-situ cases # of deaths	52 32 13 11	30 22 5 4	83 54 18 15				

	Total	Cases	and Deaths	by Ward
Ward 1		13	2	
Ward 2		5	0	
Ward 3		15	0	
Ward 4		10	6	
Ward 5		10	4	
Ward 6		12	0	
Ward 7		8	2	
Ward 8		5	1	
Unknow	/n	5	-	

## Stage at Diagnosis



## Risk and Associated Factors

Age	Rates usually increase steadily with age.
Gender	Males have a substantially higher rate than females
Race & SES*	Incidence rates are significantly higher in white males than in black males.
Occupation	Occupational exposures, most prominently within the textile, rubber, and leather industries have been known to be associated with increased rates.
Other	Tobacco consumption has been associated with an up to a five-fold higher
	incidence of bladder tumor. Beta-naphthylamine and benzidine are recognized
	bladder carcinogens. Chronic infections, calculus disease, infection with a
	parasitic fluke - Schistosoma hematobium, and treatment with the drug

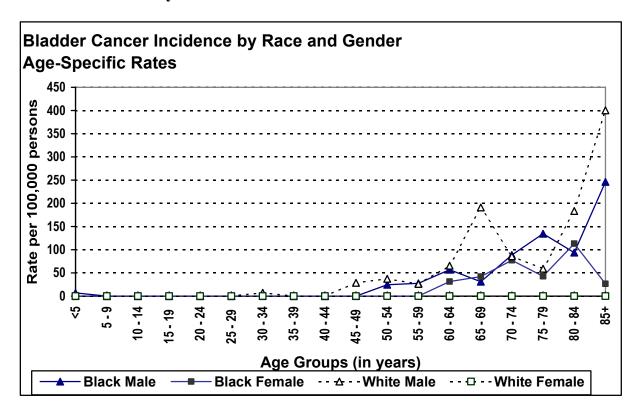
cyclophosphamide may also cause bladder tumor.

Special No	otes	
95% confidence interval on the age-adjusted total incidence	ce rate: 11.9	(9.2 - 14.5)
Mean age-adjusted incidence rate across wards:		11.2
Median age-adjusted incidence rate of wards:		11.0
Range of age-adjusted incidence rates for wards: 9.9	(6.2 Ward 2 <	16.1 Ward 3)

No cases of bladder cancer were diagnosed in a person less than forty years of age. There was an overall gradual increase in age-specific rate from age 50-54, peaking bimodally at 65-69 and 80-84 years of age for males and increasing gradually to 80-84 for females. Incidence and mortality rates overall were three and four times greater for males than for females respectively. Only white males showed an increased incidence rate from 1996 levels.

<sup>\*</sup>Socio-economic Status

Fig 6: Age-Specific Incidence and Mortality Rates by Race and Gender Urinary Bladder Cancer



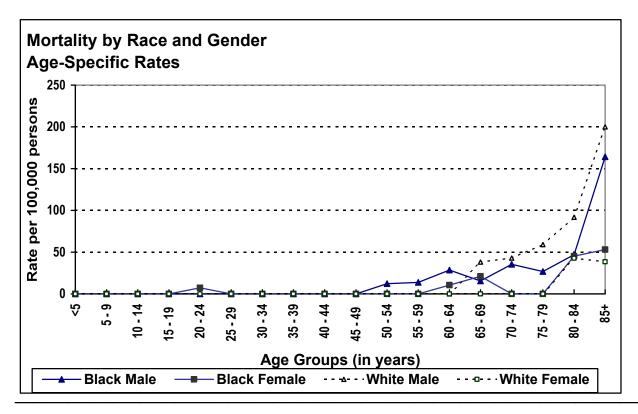
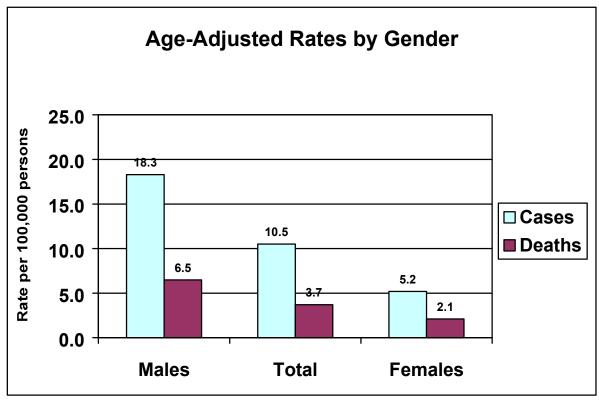


Fig. 7: 1996 Age-Adjusted Incidence and Mortality Rates for the District of Columbia - Urinary Bladder Cancer



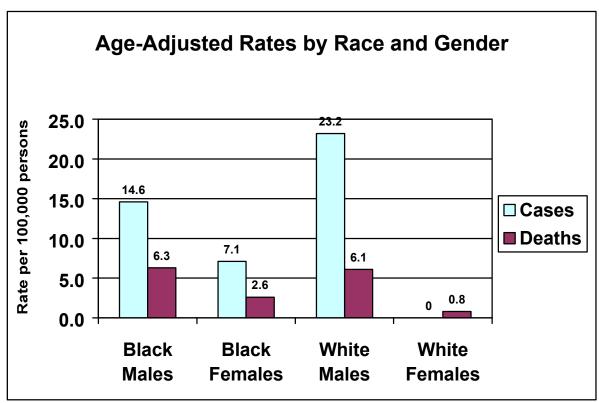
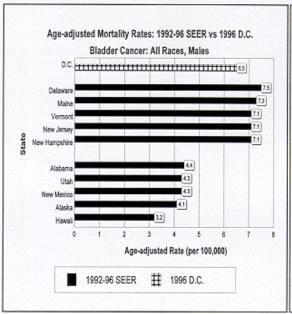
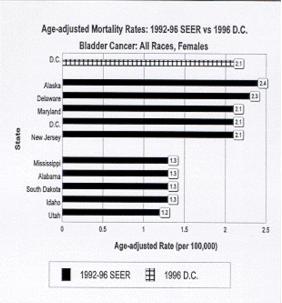
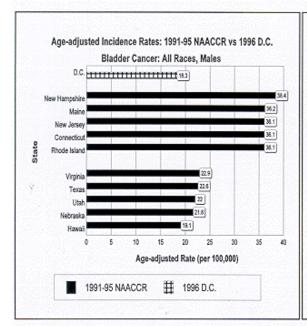
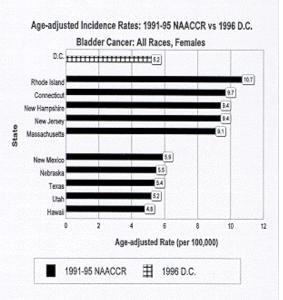


Figure 8: Comparison of the 1996 D.C. Cancer Incidence and Mortality Rates With the Highest 5 and Lowest 5 SEER (1992-96) Mortality and NAACCR (1991-95) <sup>‡</sup> Cancer Incidence Rates









Data on D.C. between 1991-1995 were not available to NAACCR for publication in April 1999.